

Building Permit Application

Howard County Maryland Department of Inspections, Licenses and Permits 3430 Court House Drive Permits: 410-313-2455 www.howardcountymd.gov

Date Received.	
	2

Permit No.:

Property Owner's Name: MARK? JANEL (ILLISON Address: 2905 SUMMER HILL DR. CITYWIFE PROPERTY OF THE PROPERTY OF Building Address: 2905 SiammER HILLOR. City: W. FRIENDSHIPstate: M.D. Zip Code: 21794 Suite/Apt. #______SDP/WP/BA #:___ Subdivision: 50BUS FARMS Census Tract: Applicant's Name & Mailing Address, (If other than stated herein)

Applicant's Name: MIGENALULAEN COWST

Address: POBOX 277

City IBENTYTOWN State: MD zip Code: Q1762

Phone: 3017304-222 Fax: 301-898-4120 _____Area:______Lot:_32 Tax Map: 0015 ____Parcel: 0026 ___ Grid: 0024 Zoning: RE5 ____ Map Coordinates: _____ Lot Size: 1.3 AC Email: MIKED LAUREL POOLS Com Existing Use: Contractor Company: AFK CONST. Proposed Use: Contact Person: Mike.
Address: Po Box 2 Estimated Construction Cost: \$ 50,000 Description of Work: INGROUND F. BERGLASS City LIBERTY TOWN State: MD Zip Code: 21762 License No.: 79053 Phong 01-304-2220 Fax: 301-898-4120 MIKE @ LAUREL Occupant or Tenant: MARK CULLISON <u>-</u> □No Was tenant space previously occupied? Engineer/Architect Company: ____ Contact Name: Responsible Design Prof.: Address: Address: ____ _____ State: ___ ______ State: ______ Zip Code: ____ Fax: Utilities Commercial Building Characteristics Residential Building Characteristics Height: ☐ SF Dwelling ☐ SF Townhouse Water Supply No. of stories: Depth ☐ Public 1st floor: Gross area, sq. ft./floor: Private 2nd floor: Sewage Disposal Area of construction (sq. ft.): Basement: ☐ Public ☐ Finished Basement Use group: ☐ Unfinished Basement Private ☐ Crawl Space ☐ Yes ☐ No Electric: ☐ Slab on Grade Construction type: ☐ Yes □ No Gas: ☐ Reinforced Concrete No. of Bedrooms: **Heating System** ☐ Structural Steel Multi-family Dwelling ☐ Electric □ oil ☐ Masonry · No. of efficiency units: No. of 1 BR units: ☐ Natural Gas ☐ Propane Gas ☐ Wood Frame ☐ State Certified Modular No. of 2 BR units: Other: No. of 3 BR units: Sprinkler System: Other Structure: ☐ Yes □ No Dimensions: Roadside Tree Project Permit Footings: **Grading Permit Number:** □Yes ZNo Roof: Roadside Tree Project Permit # ☐ State Certified Modular ☐ Manufactured Home Building Shell Permit Number: THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES. Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY **PLEASE WRITE NEATLY & LEGIBLY** -FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health , 5	124/15	the a. Will

DPZ SETBACK INFORMATION Front:		
Rear:		- 16
Side:		
Side St.:	12000.00	_
All minimum setbacks met?	☐ Yes	□No
s Entrance Permit Required?	☐ Yes	□No
Historic District?	☐ Yes	□No
ot Coverage for New Town Z	one:	
SDP/Red-line approval date:		

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	#

AEK/ CULLISON

